LINN COUNTY ENVIRONMENTAL HEALTH PROGRAM
http://www.co.linn.or.us/health/eh/eh.htm

PO BOX 100
315 SW 4TH, 2ND FLOOR
ALBANY, OR 97321
PHONE: (541) 967-3821
FAX: (541) 924-6904

OFFICE USE ONLY	
DATE RECEIVED:	RECEIVED BY:
FEE PAID:	RECEIPT #:

Temporary Restaurant License Application

FILL OUT APPLICATION COMPLETELY. For information, contact this office or see the **Temporary Restaurant Operation Guide** and the **Oregon Food Sanitation Rules** online.

Name of Event:

Event Address:
(include city, state, zip)

License Type: ☐ Single Event ☐ Intermittent (30 Day) ☐ Seasonal (90 Day)

Intermittent and Seasonal Only: ☐ Renewal If renewal, serving same menu: ☐ Yes ☐ No

Check One: ☐ For Profit ☐ Benevolent – Nonprofit Tax ID #: _____

Booth Name/Number:

Dates of Operation: Start Date End Date

Days and Times of Operation:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start Time							
End Time							

(additional space provided in the attachments for Benevolent, Intermittent or Seasonal Temporary Events)

Person in Charge of Booth:

Phone: Cell:

E-mail:

Restaurant or Organization:

Business Address:
(include city, state, zip)

Phone: Cell:

E-mail:

Event Organizer: (additional space provided on attachment for Intermittent and Seasonal Temporary Events)

Name: Contact Person:

Phone: Cell:

Email:

Facility Used for Off-Site Preparation:
(Must be a licensed facility. No home prepared foods are allowed. Attach additional sheets if needed)

Business Address:
(include city, state, zip)

Phone: Cell:

Facility Operator Signature: Date:

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TEMPORARY RESTAURANT LICENSE FACT SHEET

Temporary Restaurant Licenses are required when food is prepared or served for consumption by the public at events. **Your Temporary Restaurant License will fall into one of the following three categories**:

SINGLE EVENT Temporary Restaurant License	SEASONAL Temporary Restaurant License	INTERMITTENT Temporary Restaurant License
- Operates in conjunction with a **single** public gathering, entertainment event, food product promotion or other event. - Valid for **30 days** of continual operation.	- Must be same menu, location, and access to same sanitation services. - Operates in connection with multiple public gatherings, entertainment events, food product promotions or other events that are arranged by **the same** oversight organization*. - Information related to the specific events and dates of operation must be provided at the time of application. - Valid for up to **90 days.** - Subject to Operational Review	- Must be same menu, location and access to the same sanitation services. - Operates in connection with multiple public gatherings, entertainment events, food product promotions or other events, **at least two** of which are arranged for by different oversight organizations*. - Information related to specific events and dates of operation must be provided at the time of application. - Valid for up to **30 days**. - Subject to Operational Review

***Oversight Organization** is any entity responsible for organizing, managing, or otherwise arranging of a public gathering, entertainment event, food product promotion or other event, including but not limited to ensuring the availability of water, sewer and sanitation services.

Operational Review is the examination of a plan of operation for an establishment in order to ensure that the proposed operation conforms with applicable sanitation standards.

Operational Reviews are required for **initial Seasonal** or **Intermittent** temporary restaurant licensing **or** when a licensed facility either changes their location or makes "substantial menu alteration" which means a change of menu that increases the complexity of the menu of a seasonal temporary restaurant and intermittent temporary restaurant operation. An increase in complexity occurs when the menu moves from: *(a) Service of ready-to-eat foods that requires no further preparation or cooking; to (b) Foods that are prepared or cooked on-site and served directly to the consumer that day; to (c) Foods that must be prepared in the operation in advance and reheated or cooled over the course of multiple days of operation.*

The following must be obtained prior to your event:

- ☐ Food handler cards (1 certified worker per shift)
- ☐ Probe thermometers to check food temperatures (Range of 0° – 220°F)
- ☐ Refrigerator thermometer in every cooler/refrigerator unit
- ☐ Test strips for sanitizing solution
- ☐ Hand washing facilities (***must be set up before any food preparation takes place***)

ALL WATER UTILIZED MUST BE OBTAINED FROM AN APPROVED PUBLIC WATER SUPPLY

Water Source: | **Ice Source:**

Sewage Disposal: ☐Public ☐ Septic ☐Portable Toilet Service ☐Portable Onsite Wastewater Tank

Handwashing Facilities – Describe:
(Must be set up before any food preparation takes place)

Menu: Please submit an accurate menu or list all food items, including toppings below. NO HOME PREPARED FOODS ARE ALLOWED.
Please attach additional sheets if necessary

Food Item	Preparation Location	Cooking/Holding Method	Food Item	Preparation Location	Cooking/Holding Method
Example: Hot Dog Served/Held: ☒ Hot ☐Cold	☒ Onsite ☐ Offsite	Cooked on grill, held in steam table	Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	
Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite		Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	
Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite		Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	
Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite		Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	
Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite		Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	
Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite		Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	
Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite		Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	
Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite		Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	
Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite		Served/Held: ☐ Hot ☐Cold	☐ Onsite ☐ Offsite	

Advanced Preparation:
(Describe how foods are cooked and rapidly cooled)

Devices used for Cold Holding:
(e.g. Refrigerator, cooler)

Devices used for Hot Holding:
(e.g. Steam table, Warmer, Heat Cabinet)

Devices used for Cooking/Rapid Heating:
(e.g. Stove, Oven, Grill)

What will be done with leftover food?

License Applicant Signature:

Printed Name: | ***Date:***

Multiple Event Form
(Benevolent Licenses Only)

Event Name & Location	Dates of Operation	Signature of Applicant	Main Menu Items
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			